

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**GENERAL POWER OF ATTORNEY
TO PROSECUTE APPLICATIONS BEFORE
THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Assignee Name and Address: L'OREAL
14 rue Royale
75008 Paris - France

appoints the patent practitioners associated with Oliff & Berridge, PLC Customer Number 25944 to represent it before the United States Patent and Trademark Office in connection with any and all U.S. patent applications assigned to the above-named assignee.

The undersigned is authorized to act on behalf of the assignee.

**ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION
SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, CUSTOMER NO. 25944,
TELEPHONE (703) 836-6400.**

Date

Signature

Typed Name:

Title:

Denis BOULARD
Fondateur du pouvoir

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

GENERAL POWER OF ATTORNEY

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Owner Name: NESTEC S.A.

hereby appoints the patent practitioners associated with Oliff & Berridge, PLC Customer No. 25944 as attorneys of record to prosecute any and all patents and patent applications in which this General Power of Attorney is filed, and all continuations and divisions thereof, owned in whole or in part by the above-named owner, and to transact all business in the Patent and Trademark Office.

The undersigned is authorized to execute this document as or on behalf of the owner.

**ALL CORRESPONDENCE SHOULD BE SENT TO OLIFF & BERRIDGE, PLC,
CUSTOMER NO. 25944, TELEPHONE (703) 836-6400.**

- 3 FEB. 2005

Date

Signature

Typed Name: Paula NELSON

Title: Vice President
(if acting on behalf of an Owner)

ASSIGNMENT

(1-8) Insert Name(s) of Inventor(s)

(2) Albert DURANTON (5)
 (3) Lionel BRETON (6)
 (4) _____ (7)
 (5) _____ (8)

In consideration of the sum of one dollar (\$1.00) and other good and valuable consideration paid to each of the undersigned, each undersigned agrees to assign, and hereby does assign, transfer and set over to

(9) Insert Name of Assignee

(9) L'OREAL
NESTEC S.A.

(10) Insert Address of Assignee

(10) 14, rue Royale 75008 Paris FRANCE
Avenue Nestlé, 55, CH-1800 Vevey SWITZERLAND

(hereinafter designated as the Assignee) and Assignee's heirs, successors, assigns and legal representatives, the entire right, title and interest for the United States of America as defined in 35 U.S.C. §100, in the invention, and in all applications for patent including any and all provisional, non-provisional, divisional, continuation, international, confirmation, substitute and reissue application(s), and all Letters Patent, extensions, reissues and reexamination certificates that may be granted on the invention known as

(11) Insert Identification such as Title, Case Number, or Foreign Application Number

(11) USE OF TAURINE FOR TREATING ALOPECIA

(Attorney Docket No. 122005)

for which the undersigned has (have) executed an application for patent in the United States of America on even date herewith or

(12) Insert Date of Signing of Application

(12) on _____

(13) Alternative Identification for filed applications

(13) U.S. application Serial Number _____

filed _____

1) Each undersigned agrees to execute all papers necessary in connection with any application and any continuing, divisional or reissue applications for the invention, and any patent(s) issuing thereon, and also to execute separate assignments in connection with such applications and patents as the Assignee may deem necessary.

2) Each undersigned agrees to execute all papers necessary in connection with any interference which may be declared concerning any application or continuation or division thereof, or any patent or reissue application based thereon, for the invention, and to cooperate with the Assignee in every way possible in obtaining evidence and going forward with such interference.

3) Each undersigned agrees to execute all papers and documents and perform any act which may be necessary in connection with claims or provisions of the International Convention for Protection of Industrial Property or similar agreements.

4) Each undersigned agrees to perform all affirmative acts which may be necessary to obtain, maintain or confirm by reissue or reexamination a grant of a valid United States patent to the Assignee.

5) Each undersigned authorizes and requests the Commissioner of the U.S. Patent and Trademark Office to issue any and all Letters Patents of the United States resulting from said application(s) to the said Assignee, as Assignee of the entire interest, and covenants that he has full right to convey the entire interest herein assigned, and that he has not executed, and will not execute, any agreements in conflict herewith, and agrees that this assignment is binding on him and his heirs, successors, assigns and legal representatives.

6) Each undersigned hereby grants the firm of OLIFF & BERRIDGE, PLC the power to insert on this assignment any further identification that may be necessary or desirable in order to comply with the rules of the United States Patent and Trademark Office for recordation of this document.

In witness whereof, executed by the undersigned on the date(s) opposite the undersigned name(s).

Date	<u>01 / 28 / 2005</u>	Inventor Signature	<u>Albert Duranton</u>	(SEAL)
Date	<u>01 / 27 / 2005</u>	Inventor Signature	<u>Lionel Breton</u>	(SEAL)
Date	_____	Inventor Signature	_____	(SEAL)
Date	_____	Inventor Signature	_____	(SEAL)
Date	_____	Inventor Signature	_____	(SEAL)
Date	_____	Inventor Signature	_____	(SEAL)
Date	_____	Inventor Signature	_____	(SEAL)
Date	_____	Inventor Signature	_____	(SEAL)

This assignment should preferably be signed before: (a) a Notary Public if within the U.S.A. (b) a U.S. Consul if outside the U.S.A. If neither, then it should be signed before at least two witnesses who also sign here:

Date 01/27/2005
 Date 01/27/2005

Witness Anne ROLLAND Am. ROLLAND
 Witness Ripian ALLAB Ripian ALLAB

**DECLARATION UNDER 35 USC §371(c)(4) FOR
PCT APPLICATION FOR UNITED STATES PATENT**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below under my name;

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought, namely the invention entitled: USE OF TAURINE FOR TREATING ALOPECIA

described and claimed in international application number PCT/FR03/001919 filed June 23, 2003.

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56.

Under Title 35, U.S. Code §119, the priority benefits of the following foreign applications filed by me or my legal representatives or assigns within one year prior to my international application are hereby claimed:

French Patent Application No. 02/07763 filed June 21, 2002

French Patent Application No. 02/07764 filed June 21, 2002

French Patent Application No. 02/07765 filed June 21, 2002

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to my international application, or (b) before the filing date of the above-named foreign priority application(s):

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, CUSTOMER NUMBER 25944, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1	<i>Typewritten Full Name of Sole or First Inventor:</i>	100		DURANTON
		Given Name	Middle Initial	Family Name
2	<i>Inventor's Signature:</i>	<i>Albert</i>		<i>Deuranton</i>
3	<i>Date of Signature:</i>	January	27	2005
	Residence:	Month	Day	Year
		Maisons-Laffitte	FRY	FRANCE
	Citizenship:	City	State or Province	Country
	Post Office Address: (Insert complete mailing address, including country)	55 bis rue du Tir, 78600 Maisons-Laffitte FRANCE		

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

(Discard this page in a sole inventor application)

1 **Typewritten Full Name of Joint Inventor:**

200
Lionel

BRETON

2 **Inventor's Signature:**

Given Name Lionel

Middle Initial

Family Name

3 **Date of Signature:**

01

27

Year

Residence:

Versailles

FRX

FRANCE

Citizenship:

City

French

State or Province

Country

Post Office Address:

(Insert complete mailing address, including country)

14, rue de Satory, 78000 Versailles FRANCE

1 **Typewritten Full Name of Joint Inventor:**

Given Name

Middle Initial

Family Name

2 **Inventor's Signature:**

3 **Date of Signature:**

Month

Day

Year

Residence:

City

State or Province

Country

Citizenship:

Post Office Address:

(Insert complete mailing address, including country)

1 **Typewritten Full Name of Joint Inventor:**

Given Name

Middle Initial

Family Name

2 **Inventor's Signature:**

3 **Date of Signature:**

Month

Day

Year

Residence:

City

State or Province

Country

Citizenship:

Post Office Address:

(Insert complete mailing address, including country)

1 **Typewritten Full Name of Joint Inventor:**

Given Name

Middle Initial

Family Name

2 **Inventor's Signature:**

3 **Date of Signature:**

Month

Day

Year

Residence:

City

State or Province

Country

Citizenship:

Post Office Address:

(Insert complete mailing address, including country)

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney of the application to which it pertains.